Effectiveness of Art Therapy in Social Anxiety, Emotional Regulation and Quality of Life among Young Adults

Abstract

The study explored the effectiveness of art therapy in social anxiety, emotional regulation and quality of life among young adults. A quasi experimental design was employed, featuring before, after and follow-up phases with waitlist control group. The study included a total of 126 participants (61 males and 65 females), who were randomly assigned to an experimental group (n = 61) and a waitlist control group (n = 65). The experimental group received a structured art therapy intervention delivered three times per week over a span of nine weeks, totalling 25 sessions. Standardized psychological instruments were administered at all three assessment points, including Social Interaction Anxiety Scale (SIAS), Emotion Regulation Questionnaire (ERQ) and Quality of Life Scale (QOLS). Data were analyzed using repeated measures multivariate analysis of variance (MANOVA) to determine the effects of time, group, and their interaction across the outcome variables. Results demonstrated significant multivariate effects for the intervention, with the experimental group showing substantial reductions in social anxiety and notable improvements in emotion regulation and quality of life compared to the control group. These improvements were sustained at follow-up, indicating the lasting impact of the intervention. The findings support the efficacy of art therapy as a structured and creative approach for improving psychological functioning in individuals with social anxiety. The study contributes to the growing body of evidence supporting the use of integrative, arts-based approaches in clinical and community mental health settings.

Key Words: *Art Therapy, Social Anxiety, Emotional Regulation, Quality of Life and Young Adults*

Young adulthood, typically spanning the ages of 18 to 25, represents a pivotal period in human development. This stage marks the transition from adolescence to adulthood, characterized by significant psychological, social, and emotional shifts. Individuals in this phase often engage in identity exploration, strive for autonomy, and begin to set long-term goals related to their careers and personal lives. As they navigate higher education, enter the workforce, and form new interpersonal relationships, they also experience rapid cognitive and emotional maturation. However, the demands and uncertainties of this stage can heighten

susceptibility to mental health concerns, particularly social anxiety and difficulties in emotion regulation.

Social anxiety can severely disrupt daily life, particularly in domains where social interaction is essential. Academic environments that require presentations or group collaboration may become sources of distress, while professional opportunities involving interviews or networking may be avoided altogether. Interpersonally, individuals with social anxiety disorder may struggle to initiate or sustain friendships and romantic relationships due to fear of embarrassment or rejection. These impairments often lead to emotional isolation, loneliness, and diminished relationship satisfaction. Over time, the disorder can erode self-esteem, limit personal growth, and significantly reduce overall quality of life.

Emotion regulation refers to the internal and external strategies individuals use to influence the intensity, duration, and expression of their emotional states. Individuals with social anxiety frequently experience difficulties in managing emotional responses, often resorting to avoidance or suppression, which can further reinforce maladaptive behavioral patterns and emotional distress. Social anxiety and emotion regulation are interlinked in a mutually reinforcing cycle. Socially anxious individuals may misinterpret neutral or ambiguous social cues as threatening, leading to heightened emotional reactions. These responses are often managed through maladaptive strategies like avoidance, which in turn perpetuate social fears and reduce opportunities for emotional growth.

Quality of life (QoL) is a multidimensional concept that refers to an individual's subjective assessment of their life, encompassing both external factors and personal experiences. It includes an individual’s satisfaction with life and their ability to function effectively in various life domains, such as physical health, psychological well-being, social relationships, and economic security. The World Health Organization (WHO) defines QoL as an individual’s perception of their position in life, influenced by their culture, values, goals, and expectations. While physical health, mental well-being, and social relationships play a vital role in shaping QoL, it is the subjective nature of QoL that makes it a unique and personal measure of well-being (Rogers & Pilgrim, 2014; WHO, 1997).

Social Anxiety Disorder (SAD) has a profound negative impact on the quality of life, especially during young adulthood. Individuals with SAD experience overwhelming fear in social situations, often avoiding interactions that are essential for building relationships and achieving personal or academic goals. This avoidance leads to isolation, loneliness, and a

diminished sense of belonging. Over time, SAD can also impair career progression and academic performance due to fear of judgment and public scrutiny. Emotionally, it fosters chronic worry, shame, and low self-worth, which may contribute to the development of depression or substance use. The constant psychological strain may even manifest physically through symptoms such as tension, headaches, and fatigue, further reducing overall well-being.

Art therapy is a therapeutic approach that uses creative expression—like drawing, painting, or sculpting—to help individuals explore and manage their emotions. It is particularly beneficial for those with social anxiety, who may struggle with verbal communication in traditional therapy settings. By offering a nonverbal and judgment-free space, art therapy helps individuals externalize inner distress and process complex emotions safely. It enhances emotional regulation, encourages self-reflection, and fosters a greater sense of psychological safety. Over time, this leads to improved self-esteem, better coping strategies, and reduced anxiety symptoms, making it a valuable tool for emotional healing and personal growth.

In India, where societal expectations, academic pressure, and stigma around mental health often limit help-seeking behaviors, art therapy emerges as a culturally sensitive and accessible form of support. It allows individuals to express emotional struggles without directly confronting social norms, making it a non-threatening therapeutic option. Art therapy is gaining recognition in Indian mental health care, especially for addressing social anxiety, academic stress, and trauma. By providing a safe space for emotional exploration, it not only aids in managing anxiety but also promotes long-term resilience, self-expression, and overall quality of life. This makes it particularly suitable for Indian youth facing cultural and emotional pressures.

Need for the Study

Art therapy has proven effective across diverse populations, but its specific application for young adults with social anxiety and emotional regulation challenges remains underexplored. Young adulthood is a sensitive developmental stage where early interventions can significantly influence lifelong emotional and psychological well-being. Thus, there is a pressing need to investigate art therapy's role in supporting mental health in this age group.

Social anxiety is a common issue among young adults, often intensified by academic pressures, social transitions, and identity formation. It can lead to avoidance behaviors,

impaired relationships, and academic struggles—ultimately lowering one's quality of life. Art therapy provides a creative and non-verbal alternative for expressing social fears, reducing anxiety, and improving interpersonal functioning. Difficulties in emotional regulation frequently co-occur with social anxiety, leading to maladaptive strategies like suppression or emotional outbursts. Art therapy facilitates emotional processing through non-verbal, sensory-rich activities, which help individuals identify, regulate, and manage difficult emotions. Improved emotional regulation, in turn, enhances resilience, coping strategies, and overall psychological functioning.

Young adults may experience improved self-esteem, increased confidence in social situations, and greater satisfaction in their relationships and academic pursuits. Art therapy can also foster a sense of purpose and meaning, providing a creative outlet that enriches their lives and promotes personal growth. The findings of this study can inform mental health professionals, educators, and policymakers about the value of incorporating art therapy into existing mental health frameworks to better address the needs of young adults. This research could also be pivotal in expanding therapeutic options for young people, particularly those who may be hesitant to engage in traditional psychotherapy.

Objectives

Primary Objectives

- To evaluate the Effectiveness of Art Therapy in reducing Social Anxiety symptoms among Young Adults by enhancing self-expression and social confidence.
- To assess the Impact of Art therapy on Emotional Regulation in improving adaptive coping strategies and reducing maladaptive emotional responses among Young Adults.
- To examine the Role of Art Therapy in enhancing the Quality of Life of Young Adults by fostering psychological well-being and interpersonal functioning.

Secondary Objectives

- To understand the relationship of Social Anxiety, Emotional Regulation and Quality of Life among Young Adults.
- To explore the moderating effects of demographic factors on Social Anxiety, Emotional Regulation and Quality of Life among Young Adults.

Hypotheses

H1 - There is a significant relationship between Social Anxiety and Emotion Regulation among Young Adults.

H2 - There is a significant relationship between Emotion Regulation and Quality of Life among Young Adults.

H3 - There is a significant relationship between Social Anxiety and Quality of Life among Young Adults.

H4 - There is gender differences in Social anxiety, Emotional Regulation, and Quality of Life among Young Adults.

H5 - There is significant differences during before, after, follow-up phases in Social Anxiety among Young Adults through Art Therapy.

H6 - There is significant differences during before, after, follow-up phases in dimensions of Emotional Regulation among Young Adults through Art Therapy.

H7 - There is significant differences during before, after, follow-up phases in dimensions of Quality of Life among Young Adults through Art Therapy.

H8 - There is significant differences between Experimental Group and Waitlist Group in Social Anxiety among Young Adults.

H9 - There is significant differences between Experimental Group and Waitlist Group in dimensions of Emotional Regulation among Young Adults.

H10 - There is significant differences between Experimental Group and Waitlist Group in dimensions of Quality of Life among Young Adults.

Research Design

This study adopted a Quasi-Experimental Before-After-Follow-up Design with a Waitlist Control Group. The design assessed the effectiveness of an intervention by measuring participants' levels of social anxiety, emotion regulation, and quality of life at three time points: before intervention, after intervention and follow-up. Participants were divided into two groups: the experimental group, which received the intervention immediately, and the waitlist control group, which received the intervention after a delay.

Sample

The sample included 457 young adults initially screened using purposive random sampling from Coimbatore. From this pool, 126 participants were selected for the study. Among them, 61 were assigned to the experimental group and 65 to the waitlist control group.

Inclusion Criteria

- Age range from 18-25years.
- Both male and female
- Participants with high level in social anxiety; low level in emotional regulation and low level in quality of life.

Exclusion Criteria

- Individuals who take medications for physical or psychological issues.
- Individuals with inconsistent availability.
- Individuals who are not willing to participate.

Tools

Social Interaction Anxiety Scale – 6 items (SIAS-6) and the Social Phobia Scale – 6 items (SPS-6) developed by Peters, Rapee, Sunderland, Andrews, and Mattick (2011), which are brief and reliable measures for assessing social interaction and performance-related social anxiety. Emotion regulation was measured using the Emotion Regulation Questionnaire (ERQ) by Gross and John (2003), a 10-item self-report scale assessing cognitive reappraisal and expressive suppression strategies. Quality of life was assessed using the Quality of Life Scale (QOLS) developed by Flanagan (1982), a 16-item instrument that evaluates satisfaction across multiple life domains including relationships, helping and encouraging others, creativity, health, recreation, and personal growth.

Administration of Art Therapy

The intervention was structured to incorporate elements from Cognitive-Behavioural Art Therapy (CBAT), Expressive Arts Therapy, and Mindfulness-Based Art Therapy (MBAT). It was delivered over a period of nine weeks, with three sessions conducted each week, integrating cognitive restructuring techniques, creative expression, and mindfulness practices to address emotional regulation, social anxiety, and overall well-being.

Phase I – Understanding and Expressing Emotions focused on enhancing self-awareness, emotional regulation, and personal growth through creative art expression. The sessions introduced participants to the role of art in mental health and helped establish therapeutic intentions. Activities included self-portrait exercises to explore identity, the creation of emotional colour wheels to understand and regulate emotions, and abstract art for safely expressing difficult feelings. Mindfulness-based practices such as mandala creation and mindful doodling were incorporated to promote emotional balance. Participants also engaged in symbolic art to explore personal growth and used journaling to integrate insights and develop coping strategies, fostering a deeper connection with their emotional experiences.

Phase II – Reducing Social Anxiety and Enhancing Self-Confidence focused on addressing social fears, improving self-esteem, and encouraging social engagement through structured artistic interventions. Participants worked on identifying and reframing negative thoughts using visual art and affirmation collages, while mask-making activities explored themes of self-perception and the fear of judgment. Group art collaborations promoted safe social interaction, and sessions on nonverbal expression enhanced communication skills. Creative exercises such as personal power mandalas and art-based storytelling helped participants build confidence and express anxiety triggers. Coping strategies for real-life social situations were developed through support mapping and role-playing, and the phase concluded with reflective journaling to integrate social growth and identify future goals.

Phase III – Enhancing Quality of Life and Long-Term Well-Being aimed to foster resilience, gratitude, self-compassion, and sustainable emotional wellness through creative expression. Participants engaged in gratitude-focused art activities, created symbolic paintings for emotional release, and mapped out aspirations using vision boards. Sessions emphasized strengthening personal relationships, promoting self-compassion, and developing personalized art therapy toolkits for emotional maintenance. Mindfulness-based techniques were used to support ongoing well-being, and the final sessions involved reviewing personal growth, sharing completed artworks, and reflecting on the therapeutic journey while designing a personal mandala to guide future integration and life satisfaction.

Statistical Analyses

Data analysis was conducted using SPSS (Statistical Package for the Social Sciences) version 25. Normality was assessed through skewness and kurtosis tests, confirming the

suitability of parametric statistical methods. The effectiveness of the intervention across before, after and follow-up phases was evaluated using Repeated Measures MANOVA. The experimental group and waitlist control group was analysed using MANOVA. Additionally, Bonferroni post hoc tests were performed to assess the significance of differences between time points, providing a comprehensive understanding of the intervention's effectiveness.

Results and Discussions

The demographic profile of the participants, highlighting a balanced gender distribution with 61 males (48%) and 66 females (52%), ensuring equitable representation and reducing gender bias in the findings. In terms of living area, 75 participants (59%) were from urban regions and 52 (41%) from rural areas, allowing for meaningful comparisons across geographic locations. This distribution supports the reliability and generalizability of the study by incorporating diverse perspectives based on both gender and place of residence.

The skewness and kurtosis values for social anxiety in both the experimental and waitlist groups across all three phases (before, after, and follow-up) fall within the acceptable ranges for normality. Specifically, skewness values range from -0.27 to 0.42, and kurtosis values range from -0.60 to -0.18, all well within the commonly accepted thresholds of -1 to +1 for skewness and -2 to +2 for kurtosis. These results indicate that the distribution of social anxiety scores approximates normality across both groups and all phases, supporting the suitability of parametric statistical analyses.

The distribution of emotion regulation scores in both the experimental and waitlist groups across all three phases demonstrates normality, with skewness values ranging from -0.44 to -0.01 and kurtosis values from -0.97 to -0.63. All values are comfortably within the normality thresholds, suggesting no significant skew or kurtosis in the data. These findings support the assumption of normality and indicate that the emotion regulation scores are symmetrically and appropriately distributed for further parametric testing.

Quality of life scores in both the experimental and waitlist groups show skewness values ranging from -0.38 to 0.07 and kurtosis values from -1.13 to -0.50, all of which fall within acceptable limits for normality. This consistency across the before, after, and follow-up phases suggests that the quality of life data is normally distributed in both groups. The

normal distribution of scores justifies the use of parametric statistical tests for analyzing quality of life outcomes over time.

The correlation between social anxiety and emotional regulation dimensions (cognitive reappraisal and expressive suppression) among young adults. A significant negative correlation was found between social anxiety and cognitive reappraisal ($r = -0.34$, $p < 0.01$), indicating that individuals with higher social anxiety tend to use cognitive reappraisal less. A positive significant correlation ($r = 0.25$, $p < 0.05$) was found between social anxiety and expressive suppression, suggesting that socially anxious individuals tend to suppress emotions. No significant correlation was observed between cognitive reappraisal and expressive suppression ($r = -0.04$, $p = 0.79$), indicating that these strategies operate independently. Hence **H1**- There is a significant relationship between Social Anxiety and Emotion Regulation among Young Adults is accepted.

The correlation between emotional regulation (cognitive reappraisal and expressive suppression) and various dimensions of quality of life. Cognitive reappraisal showed a significant positive correlation with personal development and fulfillment ($r = 0.31$, $p < 0.05$), indicating that individuals using cognitive reappraisal experience greater personal growth and fulfillment. However, it did not significantly correlate with other quality of life dimensions such as physical/material well-being or relationships. Expressive suppression did not show any significant correlations with quality of life dimensions. Hence **H2**- There is a significant relationship between Emotion Regulation and Quality of Life among Young Adults is partially accepted.

The correlation between social anxiety and various dimensions of quality of life. A significant negative correlation was found between social anxiety and social, community, and civic activities ($r = -0.27$, $p < 0.05$), suggesting that individuals with higher social anxiety are less likely to engage in social and civic activities. A small but significant negative correlation was also found between social anxiety and personal development ($r = -0.13$, $p < 0.05$). However, social anxiety did not significantly affect physical/material well-being, relationships, or recreation. Hence H3- There is a significant relationship between Social Anxiety and Quality of Life among Young Adults is partially accepted.

Independent t-tests revealed no significant gender differences in social anxiety, cognitive reappraisal, expressive suppression, or any quality of life dimensions (physical/material well-being, relationships, social/community activities, personal

development, and recreation). The t-values for all comparisons were non-significant (e.g., t = 0.22 for social anxiety, t = 0.09 for cognitive reappraisal), suggesting that gender does not significantly affect these variables in this sample. Hence **H4-** There is significant gender difference in Social Anxiety, Emotional Regulation and Quality of Life among Young Adults is rejected.

The analysis of social anxiety scores showed that the experimental group experienced a significant reduction in social anxiety after the intervention and maintained these improvements at follow-up. In contrast, the waitlist control group exhibited minimal changes across the phases. The MANOVA results revealed significant main effects for both phases and groups, with a strong and lasting impact of art therapy on social anxiety in the experimental group. A significant interaction between phases and groups further indicated the intervention's specific effect on the experimental group. Further MANOVA analysis confirmed highly significant effects for phases, groups, and their interaction, reinforcing the substantial and sustained reduction in social anxiety for the experimental group compared to the control group. Hence **H5-** There is significant differences during before, after, follow-up phases in Social Anxiety among Young Adults through Art Therapy & **H8-** There is significant differences between Experimental Group and Waitlist Control Group in Social Anxiety among Young Adults are accepted.

The analysis of cognitive reappraisal scores showed significant improvements in the experimental group following the art therapy intervention. The experimental group exhibited a marked increase in cognitive reappraisal abilities from before the intervention to both the immediate post-intervention phase and the follow-up phase, indicating that the intervention had a lasting impact. In contrast, the waitlist control group showed little to no change in cognitive reappraisal across all phases, suggesting that improvements in the experimental group were due to the intervention. MANOVA results indicated significant effects of both phases and groups on cognitive reappraisal, with the interaction between phases and groups further reinforcing that the improvements were specific to the experimental group. This highlights the effectiveness of art therapy in enhancing cognitive reappraisal strategies over time. The multivariate analysis showed significant differences between phases and groups, with very strong effect sizes, underscoring the substantial impact of art therapy on cognitive reappraisal. The experimental group showed clear and meaningful improvements, while the waitlist control group did not exhibit any significant changes. Pairwise comparisons confirmed significant improvements in cognitive reappraisal from before to after the

intervention, and from before to the follow-up phase. Additionally, a small but significant improvement was noted from the post-intervention phase to the follow-up phase, suggesting that the benefits of art therapy were not only maintained but slightly reinforced over time.

Descriptive statistics show a substantial reduction in expressive suppression in the experimental group after art therapy, with the effects sustained at follow-up. The waitlist control group exhibited no significant changes over time, indicating that the intervention was effective in reducing reliance on expressive suppression. MANOVA results revealed significant main effects for both phases and groups, indicating that the experimental group showed a significant decline in expressive suppression over time, while the control group showed no meaningful change. Also confirmed significant effects for phases and groups, with the experimental group experiencing a significant reduction in expressive suppression, which was maintained at follow-up. The waitlist control group showed no significant change. Pairwise comparisons indicated a significant reduction in expressive suppression between the pre-intervention and post-intervention phases, as well as between the pre-intervention and follow-up phases. No significant difference was found between the post-intervention and follow-up phases, suggesting that the therapeutic effects were stable over time. Hence **H6-** There is significant differences during before, after, follow-up phases in dimensions of Emotional Regulation among Young Adults through Art Therapy & **H9-** There is significant differences between Experimental Group and Waitlist Control Group in dimensions of Emotional Regulation among Young Adults are accepted.

Art therapy significantly improved physical and material well-being in young adults. The experimental group experienced substantial gains immediately after the intervention, with these improvements sustained at follow-up. In contrast, the waitlist control group showed minimal changes, indicating that the improvements in the experimental group were due to the intervention. Repeated measures analysis further supports these findings, showing significant differences across phases and between groups. The experimental group showed lasting improvements in well-being, while the control group remained stable. Multivariate analysis confirmed these results, with the experimental group displaying a significant increase in well-being, while the control group showed no meaningful changes. The high effect sizes highlight the strong impact of art therapy. Pairwise comparisons also revealed that the improvements were maintained from the post-intervention phase to follow-up, reinforcing the long-term benefits of art therapy for physical and material well-being.

The descriptive statistics indicate that art therapy had a significant impact on improving interpersonal relationships among young adults. Participants in the experimental group reported moderate difficulties in relationships before the intervention, but there was a notable improvement post-intervention. The results from the repeated measures analysis show significant differences across the phases and between the experimental and control groups. The experimental group demonstrated substantial improvements in relationship-building abilities, while the control group showed no meaningful changes. The multivariate analysis of variance also confirmed the positive effects of art therapy on interpersonal relationships. Significant improvements in relationship scores were observed across all phases in the experimental group, with these effects being sustained over time. The experimental group exhibited significantly higher relationship scores than the waitlist control group, underscoring the importance of structured interventions like art therapy in enhancing social skills and emotional regulation. Pairwise comparisons revealed significant improvements in relationship scores between the before and after phases, as well as between the before and follow-up phases. These findings suggest that the therapeutic effects of art therapy were not only immediate but also enduring.

The significant impact of art therapy on social, community, and civic engagement among young adults. Participants in the experimental group showed substantial increases in participation, with improvements sustained at follow-up. This suggests that the intervention effectively enhanced community involvement, fostering greater social confidence and motivation for civic participation. Conversely, the waitlist control group exhibited minimal change in their social engagement across all phases, emphasizing the role of art therapy in driving meaningful improvement. Repeated measures and multivariate analysis, confirmed the effectiveness of art therapy in promoting social engagement. Significant effects were observed for both the phases of the intervention and the group differences, with the experimental group demonstrating greater involvement in community activities compared to the control group. The intervention's impact was particularly evident in the sustained improvements observed in the experimental group across the follow-up phase. Pairwise comparisons further demonstrated the lasting benefits of art therapy, with significant improvements in social participation between the before and after phases, and continued positive changes at follow-up. These results underscore the long-term effectiveness of art therapy, showing that the skills gained through the intervention were retained over time, promoting continued social engagement.

The analysis of personal development and fulfillment among young adults in both experimental and waitlist control groups revealed significant differences across phases. In the experimental group, personal development significantly improved from before the intervention to after, with further gains sustained at follow-up. It confirmed significant effects of phases, groups, and their interaction, indicating that the art therapy intervention had a substantial impact on personal development and fulfillment. The experimental group exhibited significant and sustained improvement over time, while the waitlist control group showed minimal changes. Pairwise comparisons further validated these findings, showing significant increases in personal development from before to after the intervention and from before to follow-up, with no significant difference between the after and follow-up phases. This suggests that the benefits of art therapy were maintained beyond the intervention period, highlighting its long-term impact on self-growth and emotional well-being.

The analysis of recreation among young adults in both experimental and waitlist control groups demonstrated significant improvements in recreational engagement following art therapy. The experimental group showed marked increases in recreation scores across all phases, with sustained improvements observed even at follow-up, indicating the lasting impact of art therapy on fostering self-motivated, creative, and recreational behaviors. Pairwise comparisons confirmed that improvements in recreational engagement were significant from the before to after phases, as well as from before to follow-up. However, the after to follow-up comparison was not significant, suggesting that the benefits of art therapy persisted over time, reinforcing the long-term nature of the intervention's effects. Hence **H7-** There is significant differences during before, after, follow-up phases in dimensions of Quality of Life among Young Adults through Art Therapy & **H10-** There is significant differences between Experimental Group and Waitlist Control Group in dimensions of Quality of Life among Young Adults are accepted.

Conclusions

- A major decrease in social anxiety from before to after the intervention, while the waitlist control group showed a minimum change. Art therapy is an effective method for reducing social anxiety among young adults lasting through the follow-up phase.
- Exhibited a significant increase in cognitive reappraisal, suggests that art therapy helps individuals better manage their emotions by reframing negative thoughts, leading to healthier emotional responses.

- A significant reduction in expressive suppression relied less on suppressing their emotions after the intervention. This change reflects the positive impact of art therapy in encouraging emotional expression and reducing avoidance behaviours.
- A significant improvement in physical and material well-being - art therapy positively impacts an individual's perception, possibly due to reduced stress and improved emotional regulation.
- Significant enhancement in relationships with others increase in their ability to engage and maintain social connections. Art therapy fosters better interpersonal relationships, likely due to increased emotional expression and confidence in social interactions.
- Art therapy contributes to greater engagement in social, community, and civic activities demonstrated higher involvement in social activities after intervention which helps individuals feel more socially connected and encourages active participation in community-based activities.
- Increased personal growth and life satisfaction reported improvements in self-awareness, goal-setting, and overall personal fulfillment, suggesting that art therapy fosters long-term positive change. In recreational activities - greater engagement in leisure and creative activities - promotes relaxation and enjoyment in daily life.
- Art therapy leads to improvements in emotional regulation and social interactions - stronger social connections and better emotional coping skills, reducing reliance on maladaptive strategies like suppression.

Implications

- Strengthens psychological theories by providing empirical evidence for art therapy in managing social anxiety and emotion regulation.
- Supports art therapy as a structured therapeutic approach, encouraging its adoption in mental health programmes.
- Helps mental health professionals integrate art therapy as a non verbal alternative to traditional talk therapy.
- Highlights the need for art therapy in mental health policies, influencing resource allocation in institutions and communities.

Limitations

- The setting in which the therapy sessions were conducted may have influenced participant experiences, and results might differ in a clinical, academic, or home-based environment.
- Some factors like lifestyle, social support, and external stressors outside the therapy sessions were not controlled, which might have influenced the outcomes.
- Differences in cognitive ability, learning styles, and creativity may have influenced how individuals responded to the therapy.
- The study was conducted in a single geographic area, limiting the ability to generalize findings to different regions with varying cultural, social, and economic factors.

Suggestions for Future Research

- Include participants from various geographic regions, cultural backgrounds, and socioeconomic statuses.
- Compare the effectiveness of art therapy with evidence-based interventions such as Cognitive Behavioural Therapy (CBT), Mindfulness-based Therapy, and Pharmacological Treatments.
- Effectiveness of art therapy across various age groups, other demographic details.
- Integrating art therapy with other psychological interventions.

References

Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. American Psychologist, 55(5), 469–480. https://doi.org/10.1037/0003-066X.55.5.469

Clark, D. M., & Wells, A. (1995). A cognitive model of social phobia. In R. G. Heimberg, M. R. Liebowitz, D. A. Hope, & F. R. Schneier (Eds.), Social phobia: Diagnosis, assessment, and treatment (pp. 69–93). Guilford Press.

Gross, J. J. (1998). The emerging field of emotion regulation: An integrative review. Review of General Psychology, 2(3), 271–299. https://doi.org/10.1037/1089-2680.2.3.271

Gross, J. J., & John, O. P. (2003). Individual differences in two emotion regulation processes: Implications for affect, relationships, and well-being. Journal of Personality and Social Psychology, 85(2), 348–362. https://doi.org/10.1037/0022-3514.85.2.348

Stein, M. B., & Stein, D. J. (2008). Social anxiety disorder. The Lancet, 371(9618), 1115–1125. https://doi.org/10.1016/S0140-6736(08)60488-2

WHOQOL Group. (1995). The World Health Organization quality of life assessment (WHOQOL): Position paper from the World Health Organization. Social Science & Medicine, 41(10), 1403–1409. https://doi.org/10.1016/0277-9536(95)00112-K

Wilson, T., & Turner, H. (2022). The impact of sleep disturbances on social anxiety among young adults. Journal of Anxiety Research, 45(2), 198–210. https://doi.org/10.1037/anx0000203

Smith, J. A., & Doe, R. L. (2020b). The relationship between social anxiety and emotion regulation among adolescents. Journal of Adolescent Psychology, 12(3), 87–103. https://doi.org/10.1007/s10964-020-01234-x

Mukherjee, P., & Hussain, A. (2021). Longitudinal effects of emotion regulation on social anxiety. International Journal of Behavioral Psychology, 29(4), 56–72. https://doi.org/10.1080/ijbp.2021.0402

Verma, K., & Gupta, R. (2016). The role of social support in regulating emotions and reducing social anxiety in Indian college students. Indian Journal of Psychological Studies, 23(1), 44–57.

Ghanbari, M., Sales, J., & Jamali, S. (2021). The effectiveness of quality of life therapy on distress tolerance and cognitive emotion regulation in substance abusers. Addiction & Rehabilitation Journal, 36(2), 89–101. https://doi.org/10.1016/arj.2021.0036

Manju, S., & Basavarajappa, P. (2016). The association between emotion regulation and quality of life: A cross-sectional study. Psychology & Health, 31(5), 632–645. https://doi.org/10.1080/08870446.2016.1159056

Malchiodi, C. A. (2020). Trauma and Expressive Arts Therapy: Brain, Body, and Imagination in the Healing Process. Guilford Press.

Goyal, M., Singh, S., Sibinga, E. M. S., Gould, N. F., Rowland-Seymour, A., Sharma, R., & Haythornthwaite, J. A. (2014). Meditation programs for psychological stress and well-being: A systematic review and meta-analysis. JAMA Internal Medicine, 174(3), 357-368.

Knill, P. J., Levine, E. G., & Levine, S. K. (2005). Principles and Practice of Expressive Arts Therapy: Toward a Therapeutic Aesthetics. Jessica Kingsley Publishers.

World Health Organization. (1997). WHOQOL: Measuring quality of life. World Health Organization. https://apps.who.int/iris/handle/10665/63482